



Complete Summary

TITLE

Heart failure: percent of patients with a history of smoking cigarettes, who are given smoking cessation advice or counseling during hospital stay.

SOURCE(S)

Specifications manual for national hospital quality measures, version 1.04. Centers for Medicare and Medicaid Services (CMS), Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2005 Aug. various p.

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percent of heart failure patients with a history of smoking cigarettes, who are given smoking cessation advice or counseling during hospital stay. For purposes of this measure, a smoker is defined as someone who has smoked cigarettes anytime during the year prior to hospital arrival.

RATIONALE

Smoking cessation reduces mortality and morbidity in all populations. Patients who receive even brief smoking cessation advice from their physicians are more likely to quit. National guidelines strongly recommend smoking cessation counseling for smokers with cardiovascular disease, including heart failure. Despite this recommendation, smoking cessation counseling is rarely provided to older patients hospitalized with heart failure.

PRIMARY CLINICAL COMPONENT

Heart failure; smoking cessation advice or counseling

DENOMINATOR DESCRIPTION

Heart failure patients with a history of smoking cigarettes anytime during the year prior to hospital arrival (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

NUMERATOR DESCRIPTION

Heart failure patients (cigarette smokers) who receive smoking cessation advice or counseling during the hospital stay

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Overall poor quality for the performance measured

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Specifications manual for national hospital quality measures, version 1.04. Centers for Medicare and Medicaid Services (CMS), Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2005 Aug. various p.

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Accreditation
Collaborative inter-organizational quality improvement
Internal quality improvement
Pay-for-performance

Application of Measure in its Current Use

CARE SETTING

Hospitals

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Measure is not provider specific

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Age greater than or equal to 18 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Nearly 5 million patients in the United States (U.S.) have heart failure (HF), and approximately 500,000 to 900,000 new cases are diagnosed each year.

EVIDENCE FOR INCIDENCE/PREVALENCE

Hunt SA, Baker DW, Chin MH, Cinquegrani MP, Feldman AM, Francis GS, Ganiats TG, Goldstein S, Gregoratos G, Jessup ML, Noble RJ, Packer M, Silver MA, Stevenson LW. ACC/AHA guidelines for the evaluation and management of chronic heart failure in the adult. Bethesda (MD): American College of Cardiology Foundation (ACCF); 2001 Sep. 56 p. [573 references]

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Each year, more than 430,000 deaths in the United States (U.S.) are attributed to a smoking related illness.

EVIDENCE FOR BURDEN OF ILLNESS

National Cancer Institute. Prevention and cessation of cigarette smoking: control of tobacco use. [internet]. Bethesda (MD): National Cancer Institute; 2002 Sep[cited 2002 Dec 06]. [10 p].

UTILIZATION

Unspecified

COSTS

Heart failure (HF) is the most common Medicare diagnosis-related group, and more Medicare dollars are spent for the diagnosis and treatment of HF than for any other diagnosis.

EVIDENCE FOR COSTS

Hunt SA, Baker DW, Chin MH, Cinquegrani MP, Feldman AM, Francis GS, Ganiats TG, Goldstein S, Gregoratos G, Jessup ML, Noble RJ, Packer M, Silver MA, Stevenson LW. ACC/AHA guidelines for the evaluation and management of chronic heart failure in the adult. Bethesda (MD): American College of Cardiology Foundation (ACCF); 2001 Sep. 56 p. [573 references]

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Living with Illness

IOM DOMAIN

Effectiveness
Patient-centeredness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Discharges, age 18 years and older, with a principal diagnosis of heart failure and a history of smoking cigarettes anytime during the year prior to hospital arrival

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Discharges with an International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) Principal Diagnosis Code for heart failure as defined in appendix A of the original measure documentation, and a history of smoking cigarettes anytime during the year prior to hospital arrival

Exclusions

- Patients less than 18 years of age
- Patients transferred to another acute care hospital or federal hospital
- Patients who expired
- Patients who left against medical advice
- Patients discharged to hospice
- Patients who had a left ventricular assistive device (LVAD) or heart transplant procedure during the hospitalization (ICD-9-CM procedure code for LVAD and heart transplant as defined in Appendix A of the original measure documentation)

DENOMINATOR (INDEX) EVENT

Clinical Condition
Institutionalization

DENOMINATOR TIME WINDOW

Time window is a single point in time

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Heart failure patients (cigarette smokers) who receive smoking cessation advice or counseling during the hospital stay

Exclusions
None

NUMERATOR TIME WINDOW

Institutionalization

DATA SOURCE

Administrative and medical records data

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

External comparison at a point in time
External comparison of time trends
Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

The core measure pilot project was a collaboration among the Joint Commission, five state hospitals associations, five measurement systems, and 83 hospitals from across nine states. Participating hospitals collected and reported data for heart failure (HF) measures from December 2002 to December 2001.

Core measure reliability visits were completed the summer of 2001 at a random sample of 16 participating hospitals across 6 states.

Preliminary data from the pilot project indicates that 39% of HF patients with a history of smoking within the past year received smoking cessation advice or counseling.

EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Joint Commission on Accreditation of Healthcare Organizations (JCAHO). A comprehensive review of development and testing for national implementation of hospital core measures. Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 40 p.

Identifying Information

ORIGINAL TITLE

HF-4: adult smoking cessation advice/counseling.

MEASURE COLLECTION

[National Hospital Quality Measures](#)

MEASURE SET NAME

[Heart Failure](#)

SUBMITTER

Centers for Medicare & Medicaid Services
Joint Commission on Accreditation of Healthcare Organizations

DEVELOPER

Centers for Medicare and Medicaid Services/Joint Commission on Accreditation of
Healthcare Organizations

ENDORSER

National Quality Forum

INCLUDED IN

Hospital Compare
Hospital Quality Alliance

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2000 Aug

REVISION DATE

2005 Aug

MEASURE STATUS

Please note: This measure has been updated. The National Quality Measures
Clearinghouse is working to update this summary.

SOURCE(S)

Specifications manual for national hospital quality measures, version 1.04. Centers for Medicare and Medicaid Services (CMS), Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 2005 Aug. various p.

MEASURE AVAILABILITY

The individual measure, "HF-4: Adult Smoking Cessation Advice/Counseling," is published in "Specifications Manual for National Hospital Quality Measures." This document is available from the [Joint Commission on Accreditation of Healthcare Organizations \(JCAHO\) Web site](#). Information is also available from the [Centers for Medicare & Medicaid Services \(CMS\) Web site](#). Check the JCAHO Web site and CMS Web site regularly for the most recent version of the specifications manual and for the applicable dates of discharge.

COMPANION DOCUMENTS

The following are available:

- A software application designed for the collection and analysis of quality improvement data, the CMS Abstraction and Reporting Tool (CART), is available from the [CMS CART Web site](#). Supporting documentation is also available. For more information, e-mail CMS PROINQUIRIES at proinquiries@cms.hhs.gov.
- Joint Commission on Accreditation of Healthcare Organizations (JCAHO). A comprehensive review of development and testing for national implementation of hospital core measures. Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 40 p. This document is available from the [JCAHO Web site](#).
- Joint Commission on Accreditation of Healthcare Organizations (JCAHO). Attributes of core performance measures and associated evaluation criteria. Oakbrook Terrace (IL): Joint Commission on Accreditation of Healthcare Organizations (JCAHO); 5 p. This document is available from the [JCAHO Web site](#).
- Hospital compare: a quality tool for adults, including people with Medicare. [internet]. Washington (DC): U.S. Department of Health and Human Services; 2005 [updated 2005 Sep 1]; [cited 2005 Apr 15]. This is available from the [Medicare Web site](#).

NQMC STATUS

This NQMC summary was completed by ECRI on February 7, 2003. The information was verified by the Centers for Medicare/Medicaid Services and the Joint Commission on Accreditation of Healthcare Organizations on February 12, 2003. This NQMC summary was updated by ECRI on October 11, 2005. The information was verified by the measure developer on December 12, 2005.

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